

**CLAIMS ONLY**

Application Number

Filing Date

**Applicant(s)**

10/622535

02-07-0

\* May be used for additional claims or amendments.

02-07-07

02-07-07

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
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47						
48						
49						
50						
Total Indep			9			
Total Depend			39			
Total Claims			48			